



TENNESSEE DEPARTMENT OF AGRICULTURE

KEN GIVENS
COMMISSIONER

REGULATORY SERVICES
PLANT CERTIFICATION

APPLICATION FOR GREENHOUSE CERTIFICATION

- ☐ **NEW**
☐ **RENEWAL**
CERTIFICATION NO. ☐☐☐☐
☐ **CHANGE OF ADDRESS**
☐ **CHANGE OF OWNERSHIP**
☐ **BRANCH**

For Departmental Use Only

Certification No. _____

Date Processed: _____

Please print or type information requested in spaces where indicated.

MAILING ADDRESS

Firm:			
Owner:		Contact Person:	
Address:			
City:	County:	State:	Zip:
Email address		Phone:	Fax:

SALES LOCATION

Physical Address Only, No Post Office Box

Address:			
City:	County:	State:	Zip:

Total Growing Area - Square Feet

Do you sell/ship out of state? ☐ Yes ☐ No

Check all that apply:

<input type="checkbox"/> Potted Foliage Plants	<input type="checkbox"/> Seasonal Plants (poinsettia, azalea, hydrangea)
<input type="checkbox"/> Potted Flowering Plants	<input type="checkbox"/> Specialties (orchids, camellia)
<input type="checkbox"/> Cut Flowers	<input type="checkbox"/> Herbs
<input type="checkbox"/> Vegetable Plants	<input type="checkbox"/> Other (List)
<input type="checkbox"/> Bedding Plants	
<input type="checkbox"/> Bulbs, Rhizomes, Etc	

PLEASE FILL OUT REVERSE SIDE. Application must be signed and dated on reverse side to be processed by Plant Certification.

List all sources of nursery stock imported into your nursery/ greenhouse or firms you plan to purchase from in the future. Include the name, address, and telephone number of each source. Attach additional pages as needed. It is further agreed that records (invoices, certification, and compliance stamps) will be kept of the actual sources from which all plants and nursery stock are obtained.

Name	Address	Telephone

Signature (Application not valid unless signed)

Date

A Plant Certification Inspector will be contacting you to set up a time to inspect your greenhouse. No certificates may be granted without a current inspection of the facilities.

Check List of items needed to be mailed to the above address for issuance of a certificate:

[] List of Vendors, [] Signed form, [] \$100.00 check per business location made out to the *Tennessee Department of Agriculture*, signed, and certificate number located in the memo field of check.

Please send application to the address below.

**Plant Certification & Apiary
Division of Regulatory Services
Tennessee Department of Agriculture
Ellington Agricultural Center
P.O. Box 40627
Nashville, TN 37204**